

**Boxing Event Report**  
**Kentucky Boxing and Wrestling Authority**  
P.O. Box 1360  
Frankfort, KY 40602

Complying with the law and rules regulating wrestling, I submit this report on the following event:

Promoter \_\_\_\_\_ Date of Show \_\_\_\_\_

Location \_\_\_\_\_ License Number \_\_\_\_\_

**Please list names of all participants and their license number (this list shall include all boxers, managers, referees, and timekeepers)**

Name	Federal ID	Name	Federal ID

Ticket sales information:

Advance sales \_\_\_\_\_ X \$ \_\_\_\_\_ = \_\_\_\_\_  
Door sales \_\_\_\_\_ X \$ \_\_\_\_\_ = \_\_\_\_\_  
Kids sales \_\_\_\_\_ X \$ \_\_\_\_\_ = \_\_\_\_\_  
Other sales \_\_\_\_\_ X \$ \_\_\_\_\_ = \_\_\_\_\_

Total sales information:

Total Sales: \_\_\_\_\_  
5% of Sales: \_\_\_\_\_  
Total Due: \_\_\_\_\_

I hereby certify that the above is a true and complete return and that no person was admitted without a ticket and that no other event has been held since the last report:

Promoter's Signature \_\_\_\_\_